

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to: <u>Wasko</u></p>		<p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>	
<p>Chase PO Box 183166 Columbus, Ohio 43218</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, print delivery address below: <u>340 S. Cleveland Ave.</u> <u>Columbus, OH</u></p>	
<p>2. Article Number (Transfer from service label) <u>7011 2970 0003 0926 0197</u></p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. </p>	
<p>PS Form 3811, February 2004</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

Domestic Return Receipt 102595-02-M-154C

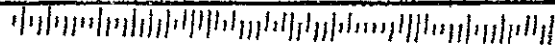
UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

THE DANN LAW FIRM CO. LPA
PO BOX 6031040
CLEVELAND, OH 44103



PLAINTIFF'S
EXHIBIT

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